

88
10-19-00

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	bag		9/10/00
O.I.P.E. CLASSIFIER		21	9/15/00
FORMALITY REVIEW	M.H.	625	10-10-00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 + Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	6-29-02
2	✓	✓	6-29-02
3	✓	✓	6-29-02
4	✓	✓	6-29-02
5	✓	✓	6-29-02
6	✓	✓	6-29-02
7	✓	✓	6-29-02
8	✓	✓	6-29-02
9	✓	✓	6-29-02
10	✓	✓	6-29-02
11	✓	✓	6-29-02
12	✓	✓	6-29-02
13	✓	✓	6-29-02
14	✓	✓	6-29-02
15	✓	✓	6-29-02
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46	✓	✓	6-29-02
47	✓	✓	6-29-02
48	✓	✓	6-29-02
49	✓	✓	6-29-02
50	✓	✓	6-29-02

Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions
 staple additional sheet her

(LEFT INSIDE)